L05000013887

- ROBERT ANDERSON 6221 YSTA RUE DR. E.			
BRACIENTON, FL. 34203			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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02/07/05--01010--001 **125.00



JR005

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:
ANDERSON MARINE SPECIALIST, LLC	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
ROBERT ANDERSON	6221 45TH AVE. DR. E.
	BRADENTON, FL. 34203
The name and the Florida street address of th	e registered agent are:
ROBERT ANDERSON	
Nar	me
6221 45TH AVE. DR. E.	
Florida street	address (P.O. Box NOT acceptable)
BRADENTON, FL 34205	FL
City, State	e, and Zip
liability company at the place designated i	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	ROBERT ANDERSON	
	6221 45TH AVE. DR. E.	
	BRADENTON, FL. 34203	
MGRM	GARY HAND	
	8001 OAK DR.	
	PALMETTO, FL. 34221	
		
		
(Lica attachment if necessary)		

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROBERT ANDERSON

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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